



REQUEST FOR LICENSING AMENDMENT

Please complete all of the following information and return to your local child care facility surveyor. Incomplete requests or requests sent to KDHE without review by the local child care facility surveyor will be returned to the facility.

Name of Facility exactly as stated on the license or certificate			License/Certificate #
Street Address of Facility	City	Zip Code + 4	County

I am requesting that the current license be amended to:

- _____ Change the name of the facility to _____
No change in ownership has occurred.
- _____ Change the name of the owner. The name of the owner was changed to: _____
because (i.e. marriage, divorce): _____. If the ownership has changed to another entity, do
not use this form. Contact the local child care facility surveyor.
- _____ Change the license capacity or units as follows: (Must provide the applicable information listed on the back of this form).
Change license capacity to a total of _____ children or youth.
- If a child care center, preschool or head start program, include the units below: (Attach additional page, if needed).
- Unit of _____ children/youth - ages _____
- Unit of _____ children/youth - ages _____
- Unit of _____ children/youth - ages _____
- Unit of _____ children/youth - ages _____
- Unit of _____ children/youth - ages _____
- Unit of _____ children/youth - ages _____

Child Care Centers, Preschools, Head Start Centers and School Age Programs requesting to amend their license to increase license capacity or add/change units, please read the instructions on the back of this form. ALLOW A MINIMUM OF 90 DAYS FOR PROCESSING.

_____ Other, Please describe:

Requested effective date (may not be prior to receipt by KDHE). (MM/DD/YYYY) _____

School Age Programs must submit an amendment fee of \$35.00 payable to the Kansas Department of Health and Environment (or complete the credit card information below) when a request to amend the license is at a time other than the annual review.

Signature of Authorized Person	Date Signed (MM/DD/YYYY)	Phone # ()	Email Address
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Credit Card Information - DISCOVER CARD ONLY	
Discover Card Account # _____	Expiration Date _____
(Please print clearly)	
Amount of the license or registration fee \$ _____	
Signature as it is written on the Card _____	
By my signature, I acknowledge my understanding that a 2.5% Convenience fee will be included in the final total of this transaction.	

**REQUEST TO AMEND LICENSE CAPACITY OR CHANGES IN UNITS FOR CHILD CARE CENTERS, PRESCHOOLS,
HEAD START OR SCHOOL AGE PROGRAMS**

A MINIMUM OF 90 DAYS IS REQUIRED TO PROCESS AN AMENDED LICENSE. Facilities must continue operation under the current license until an amended license is received.

Qualified Program Director. Submit a KDHE Program Director Approval letter if available. If not available, complete and return a Program Director's Application. The Program Director must be qualified for the change in license capacity that is requested for a license amendment.

PHYSICAL PLANT - If you are increasing your license capacity or adding/changing units, the following must be submitted:

1. **Floor plan.**
 - a) Specify the linear dimensions for each unit or room to be used by children or youth and mark the exits from each unit or room to be used for children's or youth's activities.
 - b) Include a drawing showing how the units or rooms fit into the overall floor plan of the building.
 - c) Child Care Centers, Preschools and Head Start Programs must identify the age groups to be served in each of the units. School Age Programs must identify the interest areas or use of rooms.
 - d) Indicate the number of toilets and hand sinks in the restrooms, the source of drinking water, and show how restrooms and drinking water are accessed by the children or youth.
 - e) Mark all of the exits to the outside.
 - f) Indicate on the floor plan which direction is north.
2. **Outdoor play area. (Outdoor play area is not required for preschools or school age programs unless the programs include outdoor play as part of its program of activities.) OUTDOOR PLAY AREAS MAY NOT BE SHARED WITH ANOTHER FACILITY. Outdoor play space must be on the premises.**
 - a) Specify the location and linear dimensions of the fenced outdoor play area and include the height of the fence. (Fencing may not be required for School Age Programs unless hazards exist.)
 - b) Show the route children or youth will take to enter the playground.
 - c) Indicate the location of drinking water and of restrooms, and how accessed by the children or youth.
 - d) Mark the location of pieces of stationary play equipment (swings, climbers, slides, etc.) and indicate the distance between them.
 - e) Specify the type of impact-absorbing material under and around the equipment, and the outdoor surface material on the remaining playground.
3. **Fire safety acceptance from the State Fire Marshal.** Contact the State Fire Marshal at 785-296-3401 for requirements for a change in license capacity or to add units of ages of children or youth not in the current license. License cannot be amended until acceptance by the State Fire Marshal is received.

MUST BE COMPLETED BY THE LOCAL CHILD CARE FACILITY SURVEYOR:

Child Care Facility Surveyor Recommendation:

_____ Approve: Meets compliance or does not cause facility to be noncompliant if change to license is made.
_____ Disapprove: Does not meet compliance for the following reason:

If the amendment request is to change license capacity or change units in center-based facilities, please complete the following:

On-site compliance check was conducted on _____. Notice of Survey Findings is attached.
(MM/DD/YYYY)

Answer each of the following questions Yes or No or NA:

- _____ Attached floor plan was verified during an on-site visit. Measurements are correct and the floor plan accurately reflects the layout of the child care facility including location of bathrooms, number of toilets, hand sinks and location of exits.
- _____ If license capacity is to be increased, the indoor and outdoor play space contain adequate square footage and is in compliance with regulations for the ages of children requested.
- _____ If an increase in capacity, change in the ages of children served or change in location of the units, State Fire Marshal Acceptance is attached.
- _____ The Program Director is qualified for the requested license capacity and age ranges of children serviced in the facility.

Signature of Surveyor	Date (MM/DD/YYYY)	County
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